

have to be able to tell the American people that we are being as frugal as necessary. And this legislation will allow us to have the strongest military in the world, as has been the case in the past many years, but also to have one that is not wasting money.

So we, as I said, appreciate the work done by Senators LEVIN and MCCAIN.

#### RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

#### MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will proceed to a period of morning business until 10:30 a.m., with Senators permitted to speak for up to 10 minutes each, with the time equally divided and controlled between the two leaders or their designees, with the majority controlling the first half and the Republicans controlling the second half.

The ACTING PRESIDENT pro tempore. The Senator from Nebraska is recognized.

#### HEALTH CARE REFORM

Mr. NELSON of Nebraska. Madam President, 19 years ago, after narrowly winning my first statewide race for Governor in Nebraska, I was concerned about the significant budget challenges and economic downturn we faced. Today, the United States is confronted by financial troubles on a much larger scale.

Among them, we are suffering from the compounding economic impact of years of steadily rising health care costs and millions of uninsured Americans. This crisis is strangling businesses and throwing sand in the gears of our economic engine, but the most troubling impact is on families.

From 2001 to 2007, premiums for family insurance coverage surged 78 percent while income increased just 19 percent. Wages are lagging behind not only premiums but also out-of-pocket costs which families must pay for health care services.

In my view, meaningful health care reforms are within reach and should be achieved in a bipartisan fashion without stifling minority views or using reconciliation.

Although there are signs of progress in the reform debate, some seem ready to stir partisan tensions. We should play down the divisions which ideologies present and focus instead on areas of consensus.

What could this middle ground look like?

I believe that two of the highest priorities should be reducing the cost of health care and improving efficiency in our delivery system.

Despite state-of-the-art treatment, some studies still show that Americans

receive appropriate care just 55 percent of the time.

The American Recovery and Reinvestment Act Congress approved this year made a downpayment addressing health information technology and comparative effectiveness research. As a result, doctors and patients will receive access to improved health records and better evidence about which medical treatments may best serve a patient's needs.

Senator BAUCUS and the Finance Committee have laid out a series of additional delivery system reforms which I applaud them for. These cost-containment measures are the first order of business and a mission-critical component of reform which will immediately pay dividends on affordability and access.

In an additional sign of progress in covering the uninsured, America's health insurers have agreed to guarantee health care coverage to all Americans and transition away from charging higher premiums to those who are most ill, if Congress agrees to support a requirement to obtain coverage.

While I have an aversion to mandates, I recognize that we all have a responsibility to obtain health care coverage because we all pay higher premiums when providers are forced to write off expensive, uncompensated care.

We often focus on the 45 million or more Americans who are uninsured, a crucial problem to be sure. However, we also must make sure we are not destabilizing care for the 200 million Americans who have private health insurance.

Some have called for establishing a public plan, but I think it would undermine health care services for millions of Americans and squander this unique opportunity for substantial reform.

Here are some of my concerns about a public plan run by the Government:

Washington runs our Medicare system which is already on its way to insolvency.

Our delivery system could collapse if it had to rely more heavily on Medicare-like reimbursement rates. Today, one-third of physicians limit the number of new Medicare patients they see.

A Government-run plan would further limit payments to doctors, nurses, health care workers and hospitals, and they would over time refuse patients covered by this system.

That would worsen the current cost shift to private payers, which can run in the neighborhood of 30 to 40 percent.

The result? Patients would lose access to health care, services would decline for millions and competition would disappear.

In my State of Nebraska, uncompensated care and the cost-shift from low Government reimbursements account for 15 percent of the average health insurance premium.

In sum, a one-size-fits-all Washington-run health care plan expands

Government but will not fix the main problems people face every day: affordability, access and high quality care.

Several years ago, we debated whether private competition could deliver affordable choices to cover seniors' prescription drugs. I was not convinced there would be enough competition.

Well, the jury is in. The verdict? A recent independent poll showed that 87 percent of Medicare beneficiaries are satisfied with their prescription drug coverage. And, vigorous competition among drug plans will save taxpayers \$243 billion over 10 years.

I believe private competition can work. I would suggest we empower consumers and demand that private insurers compete on service to restore a true marketplace for insurance. We need to make it easier for Americans to compare health plans and the co-pays, networks, provider quality measures and access to medical records the plans offer.

In fact, President Obama has said Americans deserve the same health insurance that their members of Congress receive. Well, Federal employees and Members of Congress choose between a wide array of coverage options offered by private health insurers, selecting the plan that best fits their needs.

Ultimately, I want consumers, not Washington, to be in charge of their health care and to give them the ability to demand more from insurers through the marketplace.

In the coming weeks, America will see a debate that tests our ability to confront this enormous challenge yet still preserve bipartisanship and reason. We can meet in the center on a reform plan making major improvements in our health care system that puts us firmly on the path toward cost containment, universal coverage and, ultimately, fairness for all Americans.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from New Hampshire.

Mr. GREGG. Madam President, I understand now is the time for the majority. If somebody appears, I will be happy to yield the floor. I ask unanimous consent to proceed in morning business.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

Mr. GREGG. I congratulate Senator NELSON for his excellent statement. His statement was very appropriate and on point on the issue of health care and health reform and the need for a bipartisan effort in this Chamber. He is one of the leaders in the ability to bring people together, and I congratulate him for a strong and thoughtful statement.

#### THE BUDGET

Mr. GREGG. Madam President, I wish to talk a little bit about the budget and specifically about the proposal